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BROWDY & NEIMARK

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[X] Original [] Supplemental

Atty. Docket: CLASSEN=1A

Combined Declaration for Patent Application and Power of Attorney

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; and that I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled METHOD AND COMPOSITION FOR AN EARLY VACCINE TO PROTECT AGAINST BOTH COMMON INFECTIOUS DISEASES AND CHRONIC IMMUNE MEDIATED DISORDERS OR THEIR SEQUELAE

the specification of which (check one)

[] is attached hereto;

[] was filed in the United States under 35 U.S.C. §111 on _____, as USSN _____; or

[XX] was/will be filed in the U.S. under 35 U.S.C. §371 by entry into the U.S. national stage of an international (PCT)

application, PCT/US94/08825, filed 04 August 1994, entry requested

on _____; national stage application received USSN _____;

§371/§102(e) date _____ (*if known),

and was amended on 10 October 1995 (if applicable)

(Include dates of amendments under PCT Art. 19 and 34 if PCT)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above; and I acknowledge the duty to disclose to the Patent and Trademark Office (PTO) all information known by me to be material to patentability as defined in 37 C.F.R. § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §§ 119, 365 of any prior foreign application(s) for patent or inventor's certificate, or prior PCT application(s) designating a country other than the U.S., listed below with the "Yes" box checked and have also identified below any such application having a filing date before that of the application on which priority is claimed:

(Number)	(Country)	(Day Month Year Filed)	() YES	() NO
(Number)	(Country)	(Day Month Year Filed)	() YES	() NO
(Number)	(Country)	(Day Month Year Filed)	() YES	() NO

I hereby claim the benefit under 35 U.S.C. § 120 of any prior U.S. Application(s) or prior PCT Application(s) designating the U.S. listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in such U.S. or PCT application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose to the PTO all information as defined in 37 C.F.R. §1.56(a) which occurred between the filing date of the prior application and the national filing date of this application:

(Application Serial No.)	(Day Month Year Filed)	(Status: patented, pending, abandoned)
08/104,529	12 August 1993	pending
(Application Serial No.)	(Day Month Year Filed)	(Status: patented, pending, abandoned)

I hereby appoint the following attorneys, with full power of substitution, association, and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

SHERIDAN NEIMARK, REG. NO. 20,520	-	ROGER L. BROWDY, REG. NO. 25,618	-	ANNE H. KERRMAN, REG. NO. 25,804
NEIMARK J. LATOEN, REG. NO. 19,963	-	IVER P. COOPER, REG. NO. 28,805	-	A. FRED STANBORN, REG. NO. 18,453
ALLEN C. YAM, REG. NO. 37,771	-	RICK E. BRUNER, REG. NO. 33,478	-	Patent Agent

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DIRECT ALL TELEPHONE CALLS TO:
BROWDY AND NEIMARK
(202) 628-5197

I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR John Barthelow Classen	INVENTOR'S SIGNATURE <i>John B. Classen</i>	DATE 2/9/96
RESIDENCE Baltimore, Maryland	CITIZENSHIP American	
POST OFFICE ADDRESS 6517 Montrose Avenue, Baltimore, Maryland 21212, United States of America		
FULL NAME OF SECOND JOINT INVENTOR	INVENTOR'S SIGNATURE	DATE
RESIDENCE	CITIZENSHIP	
POST OFFICE ADDRESS		
FULL NAME OF THIRD JOINT INVENTOR	INVENTOR'S SIGNATURE	DATE
RESIDENCE	CITIZENSHIP	
POST OFFICE ADDRESS		

n Barthelow Classen, MD, MBA To: Mr. Iver Co

2/8/96 Time: 14:12:32

BROWDY & NEIMARK

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Applicant or Patentee: John Classen Attorney's Docket No.: CLASSEN-1A
 Serial or Patent No.: _____ Filed or Issued: _____
 For: METHOD AND COMPOSITION FOR AN EARLY VACCINE TO PROTECT AGAINST BOTH COMMON INFECTIOUS DISEASES AND...

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL BUSINESS ENTITY STATUS
 (37 CFR 1.9(f) and 1.27(c)) - SMALL BUSINESS CONCERN

I hereby declare that I am
☒ the owner of the small business concern identified below:
☐ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN CLASSEN IMMUNOTHERAPIES, INC.
 ADDRESS OF CONCERN 6517 Montross Avenue, Baltimore, Maryland 21212, United States of America

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 123.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention entitled METHOD AND COMPOSITION FOR AN EARLY VACCINE TO PROTECT AGAINST BOTH COMMON INFECTIOUS DISEASES AND CHRONIC IMMUNE MEDIATED DISORDERS OR THEIR SEQUELAE by inventor John CLASSEN described in:

☐ the specification filed herewith _____, filed 04 August 1994
☒ application serial no. PCT/US94/08525
☐ patent no. _____ issued _____

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).

*Note: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities (37 CFR 1.27).

NAME _____
 ADDRESS _____
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

NAME _____
 ADDRESS _____
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))
 I hereby declare that all statements made herein of my own knowledge are true and that all statements on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING John B Classen (JOHN B CLASSEN)
 TITLE OF PERSON SIGNING OTHER THAN OWNER OWNER
 ADDRESS OF PERSON SIGNING 6517 MONTROSS AVE, BALTO. MD 21212
 SIGNATURE John B Classen DATE 2/9/96